

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10728041 FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3						
4	1					
5						
6		1				
7		1				
8		1				
9		1				
10		1				
11		1				
12		1				
13		1				
14		1				
15		1				
16		1				
17		1				
18		1				
19		1				
20		1				
21	4					
22	4					
23	4					
24	3					
25	3					
26	3					
27	3					
28	3					
29	1					
30	3					
31	3					
32	4					
33	3					
34	3					
35	4					
36	1					
37	1					
38	1					
39	1					
40	2					
41	2					
42	2					
43	2					
44	2					
45	2					
46	2					
47	2					
48	1					
49	1					
50	1					
TOTAL IND.	2					
TOTAL DEP.	101					
TOTAL CLAIMS	103					

	IND	DEP	IND	DEP	IND	DEP
51		1				
52		2				
53		2				
54		1				
55		1				
56		1				
57		1				
58		3				
59						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						